

General

Title

Cutaneous melanoma: proportion of patients with cutaneous melanoma undergoing groin block dissection who have been referred to a lymphoedema service.

Source(s)

NHS Scotland, Scottish Cancer Taskforce. Cutaneous melanoma clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Feb. 32 p. [27 references]

Measure Domain

Primary Measure Domain

Related Health Care Delivery Measures: Use of Services

Secondary Measure Domain

Clinical Quality Measure: Access

Brief Abstract

Description

This measure is used to assess the proportion of patients with cutaneous melanoma undergoing groin block dissection who have been referred to a lymphoedema service.

Note from the National Quality Measures Clearinghouse: This measure is part of the Cancer Quality Performance Indicators (QPIs) collection. For more information, including a complete list of QPI measure sets, please visit the [Healthcare Improvement Scotland Web site](#)

Rationale

Secondary lymphoedema is a common condition acquired from surgery. Ten percent to 45% of patients with melanoma develop secondary lymphoedema due to inguinal lymph nodes dissection (Carmeli & Bartoletti, 2011).

Given that not all patients will develop a lymphoedema after a groin block dissection the target has focused on the percentage of patients where referral for assessment would be clinically required.

Access to lymphoedema services is very difficult to measure accurately therefore referral is utilised within this Cancer Quality Performance Indicator (QPI) as a proxy for access. Although it will not provide an absolute measure of patient access to lymphoedema services it will give an indication of access across NHS boards and highlight any areas of variance which can then be further examined.

Lower limb lymphoedema accounts for the largest amount of cases of lymphoedema (28%) (Cormier et al., 2010). The Cutaneous Melanoma QPI Development Group felt the QPI should focus on this group of patients for initial measurement.

Evidence for Rationale

Carmeli E, Bartoletti R. Retrospective trial of complete decongestive physical therapy for lower extremity secondary lymphedema in melanoma patients. *Support Care Cancer*. 2011 Jan;19(1):141-7. [30 references]

Cormier JN, Askew RL, Mungovan KS, Xing Y, Ross MI, Armer JM. Lymphedema beyond breast cancer: a systematic review and meta-analysis of cancer-related secondary lymphedema. *Cancer*. 2010 Nov 15;116(22):5138-49. [PubMed](#)

NHS Scotland, Scottish Cancer Taskforce. Cutaneous melanoma clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Feb. 32 p. [27 references]

Primary Health Components

Cutaneous melanoma; groin block dissection; lymphoedema service referral

Denominator Description

All patients with cutaneous melanoma undergoing groin block dissection

Numerator Description

Number of patients with cutaneous melanoma undergoing groin block dissection who have been referred to a lymphoedema service

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The collection of data is piloted on a small number of patient records using a paper data collection form produced by the Information Services Division (ISD). The aim is to identify any anomalies or difficulties with data collection prior to full implementation. At least one NHS board in each Regional Cancer Network participates in the pilot.

Evidence for Extent of Measure Testing

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Hospital Inpatient

Hospital Outpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Unspecified

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Priority

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Not within an IOM Care Need

IOM Domain

Not within an IOM Domain

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All patients with cutaneous melanoma undergoing groin block dissection

Exclusions

None

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Number of patients with cutaneous melanoma undergoing groin block dissection who have been referred to a lymphoedema service

Exclusions

None

Numerator Search Strategy

Fixed time period or point in time

Data Source

Electronic health/medical record

Paper medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

Unspecified

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Does not apply to this measure (i.e., there is no pre-defined preference for the measure score)

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Prescriptive Standard

Target: 40%

The tolerance within this target accounts for situations where the patients has undergone a groin block dissection and has not developed/showed signs of a lymphoedema.

Note: Varying evidence exists regarding the most appropriate target level; therefore this may need to be redefined in the future, to take account of new evidence or when baseline data becomes available.

Evidence for Prescriptive Standard

NHS Scotland, Scottish Cancer Taskforce. Cutaneous melanoma clinical quality performance indicators. Edinburgh (Scotland): Healthcare Improvement Scotland; 2016 Feb. 32 p. [27 references]

Identifying Information

Original Title

QPI 11 – access to lymphoedema service.

Measure Collection Name

Cancer Quality Performance Indicators (QPIs)

Measure Set Name

Cutaneous Melanoma

Submitter

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Developer

NHS Scotland - National Government Agency [Non-U.S.]

Scottish Cancer Taskforce - National Government Agency [Non-U.S.]

Funding Source(s)

Scottish Government

Composition of the Group that Developed the Measure

Cutaneous Melanoma QPI Development Group

Financial Disclosures/Other Potential Conflicts of Interest

Unspecified

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2016 Feb

Measure Maintenance

The Cancer Quality Performance Indicators (QPIs) will be kept under regular review and be responsive to changes in clinical practice and emerging evidence.

Date of Next Anticipated Revision

2017 Dec

Measure Status

This is the current release of the measure.

Measure Availability

Source document available from the [Healthcare Improvement Scotland Web site](#) .

For more information, contact the Healthcare Improvement Scotland at Gyle Square, 1 South Gyle Crescent, Edinburgh, Scotland EH12 9EB; Phone: 0131 623 4300; E-mail: comments.his@nhs.net; Web site: www.healthcareimprovementscotland.org/ .

Companion Documents

The following is available:

NHS Scotland. National cancer quality performance indicators: overview of development process. Edinburgh (Scotland): NHS Scotland; 2012 Dec. 7 p. This document is available from the [Healthcare Improvement Scotland Web site](#) .

NQMC Status

This NQMC summary was completed by ECRI Institute on June 16, 2017.

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Production

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